

PTSD Basics: Symptoms and Treatment

Who Develops PTSD?

Anyone can develop PTSD at any age. A number of factors can increase the chance that someone will have PTSD, many of which are not under that person's control. For example, having a very intense or long-lasting traumatic event or getting injured during the event can make it more likely that a person will develop PTSD. PTSD is also more common after certain types of trauma, like combat and sexual assault.

Personal factors, like previous traumatic exposure, age, and gender, can affect whether or not a person will develop PTSD. What happens after the traumatic event is also important. Stress can make PTSD more likely, while social support can make it less likely.

What Are the Symptoms of PTSD?

PTSD symptoms usually start soon after the traumatic event, but they may not appear until months or years later. They also may come and go over many years. If the symptoms last longer than four weeks, cause you great distress, or interfere with your work or home life, you might have PTSD.

There are four types of PTSD symptoms, but they may not be exactly the same for everyone. Each person experiences symptoms in their own way.

1. **Reliving the event (also called re-experiencing symptoms).** Memories of the traumatic event can come back at any time. You may feel the same fear and horror you did when the event took place. For example:
 - You may have nightmares.
 - You may feel like you are going through the event again. This is called a flashback.
 - You may see, hear, or smell something that causes you to relive the event. This is called a trigger.
 - News reports, seeing an accident, or hearing a car backfire are examples of triggers.
2. **Avoiding situations that remind you of the event.** You may try to avoid situations or people that trigger memories of the traumatic event. You may even avoid talking or thinking about the event. For example:
 - You may avoid crowds, because they feel dangerous.
 - You may avoid driving if you were in a car accident or if your military convoy was bombed.
 - If you were in an earthquake, you may avoid watching movies about earthquakes.
 - You may keep very busy or avoid seeking help because it keeps you from having to think or talk about the event.
3. **Negative changes in beliefs and feelings.** The way you think about yourself and others changes because of the trauma. This symptom has many aspects, including the following:
 - You may not have positive or loving feelings toward other people and may stay away from relationships.
 - You may forget about parts of the traumatic event or not be able to talk about them.
 - You may think the world is completely dangerous, and no one can be trusted.

4. **Feeling keyed up (also called hyperarousal).** You may be jittery, or always alert and on the lookout for danger. You might suddenly become angry or irritable. This is known as hyperarousal. For example:
 - You may have a hard time sleeping.
 - You may have trouble concentrating.
 - You may be startled by a loud noise or surprise.
 - You might want to have your back to a wall in a restaurant or waiting room.

Will People with PTSD Get Better?

After a traumatic event, it's normal to think, act, and feel differently than usual—but most people start to feel better after a few weeks or months. Talk to a doctor or mental health care provider (like a psychiatrist, psychologist, or social worker) if your symptoms:

- Last longer than a few months
- Are very upsetting
- Disrupt your daily life

"Getting better" means different things for different people. There are many different treatment options for PTSD. For many people, these treatments can get rid of symptoms altogether. Others find they have fewer symptoms or feel that their symptoms are less intense. Your symptoms don't have to interfere with your everyday activities, work, and relationships.

What Treatments Are Available?

There are two main types of treatment, psychotherapy (sometimes called counseling or talk therapy) and medication. Sometimes people combine psychotherapy and medication.

Psychotherapy for PTSD

Psychotherapy, or counseling, involves meeting with a therapist.

Trauma-focused psychotherapy, which focuses on the memory of the traumatic event or its meaning, is the most effective treatment for PTSD. There are different types of trauma-focused psychotherapy, such as:

- **Cognitive Processing Therapy (CPT)** where you learn skills to understand how trauma changed your thoughts and feelings. Changing how you think about the trauma can change how you feel.
- **Prolonged Exposure (PE)** where you talk about your trauma repeatedly until memories are no longer upsetting. This will help you get more control over your thoughts and feelings about the trauma. You also go to places or do things that are safe, but that you have been staying away from because they remind you of the trauma.
- **Eye Movement Desensitization and Reprocessing (EMDR)**, which involves focusing on sounds or hand movements while you talk about the trauma. This helps your brain work through the traumatic memories.

Medications for PTSD

Medications can be effective too. Some specific SSRIs (selective serotonin reuptake inhibitors) and SNRIs (serotonin-norepinephrine reuptake inhibitors), which are used for depression, also work for PTSD. These include sertraline, paroxetine, fluoxetine, and venlafaxine.